OLT 15 2004 ST

CERTIPOME OF MAIL UNDER 37 C.F.R. 1.8

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on October 12: 2004

Signed: Signed

Lee Mosier

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Art Unit:

1772

PAVEL I. LAZAREV

Examiner:

HON, Sow Fun

Serial No.:

10/006,166

December 4, 2001

Filed:

For: Liquid Crystal Information Display

Date:

October 12, 2004

AMENDMENT / RESPONSE TRANSMITTAL

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is:

[X] Amendment;

[X] a two month extension request is hereby sought;

[] Other:

The fees have been calculated as shown below:

	Claims Remaining After	Minus	Highest Previously Paid For	Present Extra	Small Entity Rate Fee	OR	Other than a Small Entity Rate Fee
	Amendment						-
Total	55	-	55		x 9 = \$		x 18 = \$
Claims							
Indep	1	-	3		x 44 = \$		x 88 = \$
Claims							
	[] Multiple De	pendent (Claim Present	ed	+150 = \$		+300 = \$
	and Fee not						
					TOTAL \$-0-		TOTAL \$ -0-

Total Additional Claims Fee:

<u>\$ - 0 -</u>

1079681

[X]	Applicant here	pplicant hereby petitions for a TWO month Extension of Time to respond to the							
	Official Actio	n mailed May 11, 2004 a	nd includes	the following fee:					
	Small Entity			Large Entity					
[]	One month	\$ 55.00	[]	One month	\$110.00				
[X]	Two months	\$215.00	ij	Two months	\$430.00				
	Three months	\$490.00	[]	Three months	\$980.00				
[]	Four months	\$765.00	[]	Four months	\$1,530.00				
[]	Five months	\$1,040.00	[]	Five months	\$2,080.00				
		Extension of Time Fee:		<u>\$ 215.00</u>					
[]	Fee regarding Information Disclosure Statement:								
		nder 37 CFR 1.17(p)	1.C'\	\$					
	[] Petitio	n Fee Under 37 CFR 1.17	(1)	\$					
		Total Information Disclo	sure State	ment Fee: \$.00					
[]	Other fees (list individually):								
			tal Other : OTAL FEE						
[X]	A check including the amount of the above indicated TOTAL FEES is attached.								
[]	Please charge Deposit Account No. 50-2319 in the amount of \$								
[]	No fee is required.								
[]	Applicant is n	Applicant is now a SMALL / LARGE entity.							
[X]	The Commissioner is hereby authorized to charge any underpayment of the fees associated with this communication under 37 C.F.R. §1.20(d), including any necessary fees for extension of time, or credit any overpayment to Deposit Account No. 50-2319 (A-71153/AJT/TJH(463031-8)).								
			Respectfully submitted,						
	DORSEY & WHITNEY LLP								
	By The Market of the State of t								
			Tianjun I Reg. No.						
Four E	Embarcadero Ce	enter, Suite 3400		,					
San Fr	ancisco, CA 94	111-4187							
-	none No. 650-4								
Facsin	nile No. 650-4	194-8771			10796				